

12/03/01
31025 U.S. PTO

12-7-01

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Please type a plus sign (+) inside this box ☐

PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 2085
First Inventor Richard P. Haugland
Title Labeling of Immobilized Proteins Using
Dipyrometheneboron difluoride Dyes
Express Mail Label No. EL 770157675 US

U.S. PTO
10/005050
12/03/01

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- ☒ Applicant claims small entity status.
See 37 CFR 1.27.
- ☒ Specification [Total Pages 73]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets 0]
- ☐ Oath or Declaration [Total Pages 0]
 - ☒ Newly executed (original or copy)
 - ☐ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- ☒ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

- ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- ☐ Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - ☐ Computer Readable Form (CRF)
 - Specification Sequence Listing on:
 - ☐ CD-ROM or CD-R (2 copies); or
 - ☐ paper
 - ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- ☒ Assignment Papers (cover sheet & document(s))
- ☒ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
- ☐ English Translation Document (if applicable)
- ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- ☐ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
- ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:


☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____
Prior application information: Examiner: _____ Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label  or ☐ Correspondence address below

| | | | | |
|---------|-------------------------|----------|--|--|
| Name | PATENT TRADEMARK OFFICE | | | |
| Address | | | | |
| City | State | Zip Code | | |
| Country | Telephone | Fax | | |

| | | | |
|-------------------|---|-----------------------------------|----------|
| Name (Print/Type) | ALLEGRA HELFENSTEIN | Registration No. (Attorney/Agent) | 34, 179 |
| Signature |  | Date | 12/03/01 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

12/03/01

PTO/SB/17 (10-01)

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PTO

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)

Complete if Known

Application Number

Filing Date

12/3/01

First Named Inventor

Haugland, Richard P.

Examiner Name

Group Art Unit

Attorney Docket No.

2085

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Number

13-3900

Deposit
Account
Name

Molecular Probes, Inc.

- ☒ Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

- ☒ Applicant claims small entity status.
See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check☐ Credit card☐ Money
Order☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)

Fee Code (\$)

Fee Code (\$)

Fee Code (\$)

Fee Description

Fee Paid

101

740

201

370

Utility filing fee

370.00

106

330

206

165

Design filing fee

107

510

207

255

Plant filing fee

108

740

208

370

Reissue filing fee

114

160

214

80

Provisional filing fee

SUBTOTAL (1) (\$ 370.00)

2. EXTRA CLAIM FEES

Total Claims 70 -20** = 50 X 9.00 = 450.00
 Independent Claims 5 -3** = 2 X 42.00 = 84.00
 Multiple Dependent =

Large Entity Small Entity

Fee Code (\$)

Fee Code (\$)

Fee Code (\$)

Fee Code (\$)

Fee Description

103

18

203

9

Claims in excess of 20

102

84

202

42

Independent claims in excess of 3

104

280

204

140

Multiple dependent claim, if not paid

109

84

209

42

** Reissue independent claims
over original patent

110

18

210

9

** Reissue claims in excess of 20
and over original patent

SUBTOTAL (2) (\$ 534.00)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)

Fee Code (\$)

Fee Code (\$)

Fee Description

Fee Paid

105

130

205

65

Surcharge - late filing fee or oath

127

50

227

25

Surcharge - late provisional filing fee or
cover sheet

139

130

139

130

Non-English specification

147

2,520

147

2,520

For filing a request for *ex parte* reexamination

112

920*

112

920*

Requesting publication of SIR prior to
Examiner action

113

1,840*

113

1,840*

Requesting publication of SIR after
Examiner action

115

110

215

55

Extension for reply within first month

116

400

216

200

Extension for reply within second month

117

920

217

460

Extension for reply within third month

118

1,440

218

720

Extension for reply within fourth month

128

1,960

228

980

Extension for reply within fifth month

119

320

219

160

Notice of Appeal

120

320

220

160

Filing a brief in support of an appeal

121

280

221

140

Request for oral hearing

138

1,510

138

1,510

Petition to institute a public use proceeding

140

110

240

55

Petition to revive - unavoidable

141

1,280

241

640

Petition to revive - unintentional

142

1,280

242

640

Utility issue fee (or reissue)

143

460

243

230

Design issue fee

144

620

244

310

Plant issue fee

122

130

122

130

Petitions to the Commissioner

123

50

123

50

Processing fee under 37 CFR 1.17(q)

126

180

126

180

Submission of Information Disclosure Stmt

581

40

581

40

Recording each patent assignment per
property (times number of properties)

146

740

246

370

Filing a submission after final rejection
(37 CFR § 1.129(a))

149

740

249

370

For each additional invention to be
examined (37 CFR § 1.129(b))

179

740

279

370

Request for Continued Examination (RCE)

169

900

169

900

Request for expedited examination
of a design application

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print/Type)

Allegra Helfenstein

Registration No.
(Attorney/Agent)

34,179

Complete (if applicable)

Telephone

(541) 465- 8362

Signature

Allegra Helfenstein

Date

12/3/01

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